

STATEMENT OF
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BEFORE THE
SUBCOMMITTEE ON HEALTH
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES

WITH RESPECT TO

H.R. 3253, *NATIONAL MEDICAL EMERGENCY PREPAREDNESS ACT OF 2001* AND
H.R. 3254, *MEDICAL EDUCATION FOR NATIONAL DEFENSE IN THE 21ST CENTURY ACT*

WASHINGTON, DC

APRIL 10, 2002

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

On behalf of the 2.7 million members of the Veterans of Foreign Wars of the United States (VFW) and our Ladies Auxiliary, I would like to thank you for the opportunity to comment on the legislation before you today. In President Bush's State of the Union message, he stated that preventing a bioterrorist, as well as a chemical or nuclear attack, is of paramount importance to the security of the country. At the same time, if an attack were to occur, we must be prepared to handle it successfully. Preparedness is ultimately at the heart of what the following legislation is about.

H.R. 3253
National Medical Emergency Preparedness Act of 2001

The VFW strongly supports this legislation that would establish at least four regional medical emergency preparedness centers that would carry out research, provide education and rapid

response laboratory assistance into the detection, diagnosis, vaccination, protection, and treatment of chemical, biological and radiological threats to the public health and safety.

We testified on October 15, 2001, that the Department of Veterans Affairs (VA) has an obligation to backup the Department of Defense (DOD) in times of war or national emergency, commonly referred to as their “fourth mission.” Further, the VA is a federal-level partner with the Federal Emergency Management Agency (FEMA) and the National Disaster Medical System. We believe that expanding the Department of Veterans Affairs’ ability to respond to national disasters is only logical following the tragedy of September 11, 2001.

We also agree with the Secretary of Health and Human Services, Tommy G. Thompson, that “our nation’s hospitals stand in the first line of defense against potential incidents that could involve large scale casualties, including bioterrorism and chemical terrorism” and “ they must be ready to respond effectively, and they need the nation’s assistance to become prepared.” This bill moves our nation’s largest health care system, the Veterans Health Administration, a step closer towards total preparedness.

H.R. 3254
Medical Education for National Defense in the 21st Century Act

The VFW also supports this preparedness legislation that would allow DOD and VA “to develop and disseminate education and training programs on the medical responses to the consequences of terrorist activities.”

To quote Secretary Thompson again, “Our first goal is to ensure that hospitals [and frontline providers] have the capacity to identify the signs of... attack and be prepared to respond.” Recognizing that VA and DOD have unique capabilities in this area, this legislation would strengthen their role in training our nation’s health care professionals.

In summary, we are fully aware that in order for VA to respond to DOD contingencies and national emergencies, they must be properly prepared. This forms the basis for our support. We, however, wish to remind members of this subcommittee that VA is currently struggling to provide care to its primary constituent, the veteran, which leads us to caution that VA should not be overburdened with fourth mission requirements unless Congress is prepared to fully fund them. The VFW recommends an additional \$250 million for VA to properly carry out its fourth mission preparedness.

This concludes my testimony, and I would be happy to answer any questions you or the members of this subcommittee may have.